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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/743,316	12/23/2003	Ole Arnt Anfindsen	43315-201413	5571

TITLE OF INVENTION: METHOD AND A SYSTEM FOR PROGRAMMING AN INDUSTRIAL ROBOT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300	\$0	\$1700	11/24/2006	
EXAMINER A		ART UNIT	CLASS-SUBCLASS	03/16/2007 MAI	HMED2 00000075 220	261 10743316	
MARC, M	CDIEUNEL	3661	700-245000	01 FC:1501	1409.00 DA 300.00 DA		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the p	atent front page, list	, VENA	BLE LLP	
			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a				
			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
ABB RE	SEARCH LTD		Zürich,	SWITZERLAND			
Please check the approp	riate assignee category or	categories (will not be p	rinted on the patent):	Individual CCorporati	on or other private group	entity Governmen	
	are submitted: No small entity discount p # of Copies	permitted)		d. Form PTO-2038 is attavantherized to charge the resist Account Number	any deficie	encies	
_ '	atus (from status indicate	•	b. Applicant is no long	ger claiming SMALL ENT	ITY status. See 37 CFR	1.27(g)(2).	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Eric J. Franklin

Authorized Signature

PTO/SB/21 (09-06)
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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number 10/743,316-Conf. #5571 Filing Date December 23, 2003 First Named Inventor Ole A. Anfindsen Art Unit 3661 Examiner Name M. Marc Attorney Docket Number 43315-201413

ENCLOSURES (Check all that apply)							
x Fee Transm	nittal Form	Drawing(s)	After to TO	Allowance Communication			
Fee A	Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences			
Amendmen	nt/Reply	Petition		eal Communication to TC eal Notice, Brief, Reply Brief)			
After	Final	Petition to Convert to a Provisional Application	Prop	rietary Information			
Affida	avits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address Status Letter		s Letter			
Extension of	of Time Request	Terminal Disclaimer		x Other Enclosure(s) (please Identify below): PART 2 (FEE) ISSUE FEE TRANSMITTAL SHEET			
Express Ab	pandonment Request	Request for Refund					
Information	Disclosure Statement	CD, Number of CD(s)					
Certified Co	opy of Priority s)	Landscape Table on CD					
	ssing Parts/ Application	Remarks					
Reply to Missing Parts under 37 CFR 1.52 or 1.53							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm Name	VENABLE LLP O						
Signature	and fulls						
Printed name	Eric J. Franklin						
Date	March 15, 2007	Reg. N	37,134				

PTO/SB/17 (07-06) Approved for use through 01/31/2007. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE duction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known TRADE Effective on 12/08/2004. 10/743,316-Conf. #5571 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). **Application Number** FEE TRANSMITTAL December 23, 2003 Filing Date Ole A. Anfindsen First Named Inventor For FY 2007 **Examiner Name** M. Marc Applicant claims small entity status. See 37 CFR 1.27 3661 Art Unit 43315-201413 TOTAL AMOUNT OF PAYMENT (\$) 1,700.00 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Money Order None Other (please identify): Check Credit Card Venable LLP x Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 x Credit any overpayments **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity** Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 100 50 130 65 200 100 Design 200 100 300 150 160 80 Plant 250 600 300 500 Reissue 300 150 Provisional 200 100 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 Multiple Dependent Claims **Total Claims** Fee Paid (\$) Extra Claims Fee Paid (\$) Fee (\$) - 20 = HP = highest number of total claims paid for, if greater than 20. Extra Claims Fee Paid (\$) Indep. Claims HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) _____ (round up to a whole number) x - 100 = Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1501 Utility issue fee 1,400.00 300.00 1504 Publication fee for early, voluntary, or normal .. SUBMITTED BY Registration No. 37,134 Telephone (202) 344-4936 Signature (Attorney/Agent)

Date

March 15, 2007

Name (Print/Type)

Eric J. Franklin